

23RD NAVAJO NATION COUNCIL OFFICE OF THE SPEAKER

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Health, Education, and Human Services Committee receives report from the Northern Navajo Medical Center focusing on improving patient services

SHIPROCK, N.M. – On Monday, the Health, Education, and Human Services Committee received a report from administrators and staff with the Northern Navajo Medical Center, who provided update reports from service unit issues ranging from patient care, prescription management, customer service, sexual assault services, and the use of technology in providing health care.

The Northern Navajo Medical Center has a hospital in Shiprock, two health centers, and two health stations located in Sanostee and Toadlena. The NNMC has a user population of approximately 53,000 people and serves 22 Navajo chapters in the Northern Navajo Agency.

HEHSC member Council Delegate Amber Kanazbah Crotty (Beclabito, Cove, Gadi'i'áhi/To'Koi, Red Valley, Tooh Haltsooi, Toadlena/Two Grey Hills, Tsé ałnáoz't'l'í) raised concerns regarding the potential repeal of the Affordable Care Act by Congress, and asked how it may affect the NNMC's services to Navajo patients.

"This committee is very concerned with the proposed repeal of the ACA. The reason I ask is because Congress has begun looking at the performance and expenditure of federal dollars by Indian Health Service and it is important that we illustrate that these services are vital to the Navajo Nation," said Delegate Crotty.

According to Carenda F. Robinson, NNMC's Health System Administrator and director of Administrative Services, due to the ACA the NNMC experienced a large increase in the number of patients in the last few years that rely on their service units. She added that funding cutbacks could affect services, and it would also affect third-party billing such as Medicaid, Medicare, and private insurance reimbursements.

The report from NNMC also stated that their service units have begun making improvements such as expediting services in their pharmacy, decreasing patient wait-times, and using tele-health communication via video conferencing for patients to receive medical consultation rather than having patients drive long-distances to their health care service units.

HEHSC member Council Delegate Steven Begay (Coyote Canyon, Mexican Springs, Naschitti, Tohatchi, Bahastl'a'a') commended the NNMC staff for improving customer relations for their patients, and suggested that Navajo language interpreters be a staple provided to patients – particularly Navajo elders.

"Medical interpretation is difficult, especially in terms of the Navajo language. You have to train medical staff—the most fluent speakers—to begin tackling the interpretation challenges. We need to band together and provide these services to our people, especially our elders who may understand more complex concepts in the Navajo language," said Delegate Begay.

Delegate Begay recommended a directive to committee members to have NNMC implement a "Navajo medical interpreter course" that would train Navajo speaking medical staff to provide Navajo interpreters to patients.

HEHSC members voted 4-0 to approve the directive.

HEHSC member Council Delegate Nathaniel Brown (Chilchinbeto, Dennehotso, Kayenta) also recommended that the NNMC begin looking into how they can provide public education in regards to sexual health for the youth, and sexual assault and human trafficking prevention.

"Our committee is looking to add and change laws regarding sexual assault and human trafficking, and this is where we need our medical nurses, doctors, and counselors. We have received reports of cases in which Navajo children are being trafficked, and I encourage NNMC to include this type of public education through your services to increase awareness," said Delegate Brown.

Delegate Brown requested that the service units also provide data regarding sexual assault and human trafficking cases that may have utilized the hospital's services, and encouraged NNMC to continue tracking the data, which would aid in amending the Navajo Nation's criminal code.

HEHSC members voted 4-0 to accept the report, with one directive.

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